



Miami County Environmental Health Department

201 S. Pearl, Ste. 201
Paola, KS 66071

www.miamicountyks.org

Telephone: 913-294-4117
Fax: 913-294-9545

HOLDING TANK AFFIDAVIT

Date: _____

I, _____, understand that I can use my septic tank only as a holding tank at _____, until such time that the soil absorption system is installed, and inspected and approved by the Miami County Environmental Health Department.

I further understand that the septic tank must be pumped, as needed, by a licensed Sanitary Disposal Contractor. Copies of the receipts from the pumping shall be submitted to the Miami County Environmental Health Department at 201 S. Pearl, Ste. 201, Paola, Kansas 66071.

Owner's Signature

Owner's Signature

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Subscribed and sworn to me this _____ day of _____, 20____

Notary Public

My Commission Expires: _____

This institution is an equal opportunity provider and employer.